



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All other correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated and corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 07/14/2006

CHRISTOPHER C. WINSLADE
 MCANDREWS, HELD & MALLOY
 500 W. MADISON STREET
 SUITE 3400
 CHICAGO, IL 60661

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Michael T. Cruz	(Depositor's name)
Michael T. Cruz	(Signature)
July 28, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/692,661	10/18/2000	Jacob Rael	39390/CAC/R600	7173

TITLE OF INVENTION: ADAPTIVE RADIO TRANSCEIVER WITH A WIDE TUNING RANGE VCO

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	10/16/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS				
MILORD, MARCEAU	2618	455-020000			07/31/2006 TBESHAN2 00000015 130017 09692661	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page (list FC:1501)
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

McAndrews, Held & Malloy, Ltd.
 1400 20th Street, N.W.
 Washington, D.C. 20036
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Broadcom Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Irvine, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-0017 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Michael T. Cruz

Date July 28, 2006

Typed or printed name Michael T. Cruz

Registration No. 44,636

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FROM McANDREWS, HELD, & MALLOY

JUL 28 2008

(FRI) 7.28'06 15:11/ST. 15:09/NO. 4861050277 P 4

PTO/SB/17 (01-06)

Approved for use through 07/31/2008, OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Subject to the consolidated Appropriates Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	\$1400
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Complete if Known	
Application Number	09/692,661
Filing Date	October 18, 2000
First Named Inventor	Jacob Rael
Examiner Name	Marceau Milord
Art Unit	2618
Attorney Docket No.	15267US01

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

Charge Fee(s) indicated below

Charge Fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fees(s) Credit any overpayments
under 37 CFR 1.16 and 1.17

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid(\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity	Fee (\$)	Fee (\$)
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50	25
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200	100
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360	180
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Each independent claim over 3 (including Reissues)

Multiple dependent claims

Multiple Dependent Claims	Fee	Fee Paid (\$)
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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-20 or HP x _____ = _____

Fee	Fee Paid (\$)
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HP = highest number of total claims paid for, if greater than 20

Fee	Fee Paid (\$)
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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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-3 or HP x _____ = _____

Fee	Fee Paid (\$)
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HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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-100 /50 (round up to a whole number) x _____ = _____

Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification. \$130 fee (no small entity discount)

Fee Paid (\$)

Other (e.g., late filing surcharge): Issue Fee

\$1400

SUBMITTED BY

Signature	<i>Michael T. Cruz</i>	Registration No. (Attorney/Agent)	44,636	Telephone	(312)775-8000
Name (print/type)	Michael T. Cruz			Date	44,636